

UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF NORTH CAROLINA
Pro se [Non-prisoner] Complaint Form



Tony Esai Chambers
(Your Name)

Plaintiff,

v.

Dept of Public Safety
Anson Correctional
CCMSI, Carrier

Defendant(s).

Civil Action No. 1:22CV754
(to be assigned by the Clerk)

COMPLAINT

I. JURISDICTION

II. PARTIES

A. Plaintiff

Name of Plaintiff:

Address:

Tony Esai Chambers
1858 Flowers Road
Jackson Springs NC 27281

B. Defendant(s) (**Notice:** A person must be identified in subsections B and C in order to be considered as a defendant.)

Name of Defendant:

Current Address:

Department of Public Safety
512 N. Salisbury St.
Raleigh, NC 27604

- C. Additional Defendants (please provide the same information for each defendant as listed in Item B above):

Anson Correctional Institute
552 Prison Camp Rd.
Polkton NC, 28135

CCMSI (Carrier)
4623 Arborloft Ct.
Charlotte NC, 28270

III. STATEMENT OF CLAIM

(State here as briefly as possible the **FACTS** of your case. Do this by identifying the alleged legal wrong and by describing how each defendant named in Section II.B. and C. above is personally responsible for depriving you of your rights. Include relevant times, dates, and places. Also, you must state the basis for federal jurisdiction. In other words, why should the case be in federal court as opposed to state court. **DO NOT GIVE LEGAL ARGUMENTS OR CITE ANY CASES.** Number and set forth each separate claim in a separate paragraph.) (Attach extra sheets if necessary.)

On Nov. 27th 2020 I worked for the dept. of public safety. As a correctional officer II. I was at Anson Correctional Institute in Polkton NC. I was exposed to Covid 19, in numerous areas that day. My shift began at 5:45am. I was working in a unit that was exposed to Covid. I was making Rounds every 30 minutes into 3 separate Pods of 48 Female offenders, I was instructed to wear PPE. At 4:00pm I was asked

III. STATEMENT OF CLAIM - continued.

To go to the Brown's Creek Facility, a men's minimum unit. I was instructed to check out a car (state vehicle) and follow the ambulance to the Hospital, That I would not need any PPE. Around 4:30pm when I arrived at Brown's Creek, I was instructed to get in the ambulance. The male offender needed immediate care. He had a Temperature of 103.5, was experiencing Covid Symptoms, when I got in the hospital room with male offender I began experiencing symptoms myself. At 10pm I called Anson Correction about Relief of duty. I got Relief around 10:30pm, when I arrived back to Anson to check in the state vehicle, I called and informed Lt. Harris I would not be back at work tomorrow 11/28/2022. And would not Return until I was tested for Covid, (1)

Statement of Claim Cont. III

On Nov. 29th, 2020 I went to FastMed (worker's compensation approved medical provider). On Nov. 29th, 2020 I was tested and provided a Doctor's note not to return to work until results were back. On Dec. 2nd, 2020 Results came back Positive for Covid. I was given a doctor's note to quarantine. I called My Facility, Scanned and email doctor's note. Provided Information for application of Federal Quarantine Relief Provided by the Coronavirus act Care (2020). On Dec. 11th, 2020 I went back to FastMed I was feeling just as bad as I did on Nov. 27th, 2020, I was given a doctor's note not to return to work until I was free of Symptoms 24 hours, I was expected to Return to work on Dec. 13th, 2020. On Dec. 13th 2020, HR representative called me and wanted to know why I was not in line up, I informed the facility at that time I was not able, (2)

Statement of Claim III.

I Informed facility Representative at that time I wanted to make a Worker's Compensation Complaint, "I was not able to walk from my bedroom to my living room, Or drive 1 hour one way to work, I was told that I could not file for Covid. From Dec. 13th 2020 to December 22nd, 2020 I Called and Requested workers compensation claim form and to speak with Warden, associate warden and I was never allowed to or to connect with.

= I began to Recieve certified letters threatening to terminate employment,

= On Feb. 10th 2021 I Recieved a certified letter terminating employment, for not Returning to work after a doctor had instructed me to Return to work in 24 hours. on Dec. 11th 2020,

(3)

Statement of claim.

In Feb. 2021 I filed for worker's compensation myself, In March 2021 I Received a letter from CCMSI stated I had Worker's Compensation for medical only, When I called CCMSI I was told that CCMSI would not be providing any provisions for medical benefits,

I never Received Holiday Pay, Covid Relief Pay (80 hours)

I was sent a document demanding \$15,00 for overpayment, I currently Received this harrassing attempt to collect a debt,

My claim is that I have been Wrongfully terminated. I have been discriminated because of disabilities (Covid-19).

I had filed a grievance in Oct. 2020 for a staff member threatening me,

I feel like the way I was handle was in Retaliation for filing that grievance. (14)

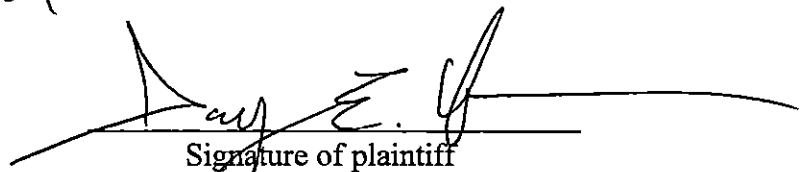
IV. RELIEF

State briefly and exactly what relief you want from this court.

I am asking for Back Pay Compensation
\$5 million dollars For Compensatory and
Ponitive Damages, due to age, sex and
disability discrimination.

I was intentional targeted and discriminated
against because I filed a grievance.

Signed this Sept, day of September, 20 22
9th day


Signature of plaintiff

1858 Flowers Rd
Address

Jackson Springs NC 27281

910-921-0071
Telephone number